



Please type or print in ink.					
NAME OF FILER (LAST)	(FIRST) 7013 APR - 1 A MINDEE				
Buenaventura, Raymond Ambrosio					
1. Office, Agency, or Court	RECEIVED				
Agency Name					
Daly City	Councilmember				
Division, Board, Department, District, if applicable	Your Position *				
▶ If filing for multiple positions, list below or on an attachment.	· · · · · · · · · · · · · · · · · · ·				
Agency: SMC Peninsula Traffic Congestions Relief Alliance	Position: Board Member				
2. Jurisdiction of Office (Check at least one box)					
☐ State	☐ Judge or Court Commissioner (Statewide Jurisdiction)				
Multi-County	Councilmember Your Position  Board Member    Judge or Court Commissioner (Statewide Jurisdiction)     County of     Other     Leaving Office: Date Left   / / (Check one)     The period covered is January 1, 2012, through the date of leaving office.     The period covered is   / / / (through the date of leaving office.     The period covered is   / / / / (through the date of leaving office.     In umber of pages including this cover page:				
☑ City of Daly City	·				
3. Type of Statement (Check at least one box)					
Annual: The period covered is January 1, 2012, through	(Check one)  The period covered is January 1, 2012, through the date of				
December 31, 2012.	,				
The period covered is, through December 31, 2012.	leaving office.				
Candidate: Election year and office sought, if	different than Part 1:				
4. Schedule Summary					
Check applicable schedules or "None." ► Total	number of pages including this cover page:				
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached				
Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule attached				
Schedule B - Real Property – schedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached				
-or-					
None - No reportable intere	ests on any schedule				
5. Verification					
	3				
T certify under penalty or perjury under the laws or the State of					
Leading allowing of perjary under the laws of the state of					
Date Signed OC/JS /JOIT					
(month, day, year)					
	2013				

## SCHEDULE A-1 **Investments**

## Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 7			
Name			
Raymond A. Buenaventura			

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Apple, Inc.	The state of the s
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Software & Programing	
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
✓ Stock ☐ Other	Stock Other
(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
P INNIE OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
☐ Stock ☐ Other	Stock Other
(Describe)	(Describe)
Partnership   Income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Dver \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	(Describe)
Partnership   Income Received of \$0 - \$499   Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	1
	<u></u>
NOGOTILE DISPOSED	ACQUIRED DISPOSED
Community	
Comments:	<u> </u>

## **SCHEDULE A-2** Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

Raymond A. Buenaventura

► 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
Buenaventura Law Firm	Catherine Buenaventura CSR
Name 2171 Junipero Serra Blvd, Ste 690, Daly City CA 94014 Address (Business Address Acceptable) Check one Trust, go to 2  Business Entity, complete the box, then go to 2	Name 2171 Junipero Serra Blvd, Ste 690 Daly City CA 94014 Address (Business Address Acceptable) Check one Trust, go to 2  Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$0 - \$1,999   \$2,000 - \$10,000  //12  //12   \$10,001 - \$1,000,000   ACQUIRED   DISPOSED   \$100,001 - \$1,000,000   Over \$1,000,000   Ov	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:  \$0 - \$1,999
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA	YOUR BUSINESS POSITION  ▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA
SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)  \$0 - \$499	SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)  \$0 - \$499  \$10,001 - \$100,000  \$500 - \$1,000  OVER \$100,000  \$1,001 - \$10,000  \$1,001 - \$10,000  > 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)  None
Mandy Yagi	
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:  INVESTMENT REAL PROPERTY	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST  Check one box:  INVESTMENT  REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Description of Business Activity <u>or</u> City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000	FAIR MARKET VALUE   IF APPLICABLE, LIST DATE:   \$2,000 - \$10,000     10,001 - \$1,000,000     ACQUIRED   DISPOSED   Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST  Property Ownership/Deed of Trust  Stock  Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:\_

## SCHEDULE D Income - Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name
Raymond A. Buenaventura

► NAME OF SOURCE (Not an	Acronym)	► NAME OF SOURC	E (Not an Acronym	)	
ADDRESS (Business Addres	is Acceptable) an Francisco CA 94132	ADDRESS (Busine	ADDRESS (Business Address Acceptable) .		
BUSINESS ACTIVITY, IF ANY, OF SOURCE		BUSINESS ACTIVI	BUSINESS ACTIVITY, IF ANY, OF SOURCE		
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S) 200.00 Tickets	DATE (mm/dd/yy)	VALUE +	DESCRIPTION OF GIFT(S)	
\$			\$		
\$		—    <i></i>	\$		
▶ NAME OF SOURCE (Not an	Acronym)	► NAME OF SOURC	E (Not an Acronym	n)	
ADDRESS (Business Addres	s Acceptable)	ADDRESS (Business Address Acceptable)			
BUSINESS ACTIVITY, IF AN	BUSINESS ACTIVI	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
\$			\$		
\$		_    _/_/_	\$		
\$	<del></del>	/	\$		
NAME OF SOURCE (Not an	Acronym)	► NAME OF SOURC	E (Not an Acronym	)	
ADDRESS (Business Addres	s Acceptable)	ADDRESS (Busines	ss Address Accepta	able)	
BUSINESS ACTIVITY, IF AN	Y, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
\$		_/_/_	\$		
/\$		`/	\$		
/			\$		
Comments:					

FPPC Form 700 (2012/2013) Sch. D FPPC Advice Email: advice@fppc.ca.gov FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov